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APPLICANTS

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**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a CIP of 10/042,011 10/18/2001 ABN  
*Verified Pat*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY PA	SHEETS DRAWING 5	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 2
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ADDRESS  
 23573  
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TITLE  
 Barrier device with foam interior

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